

## **PRESCRIPTION DRUG MONITORING PROGRAM**

The Kansas Board of Pharmacy is very pleased to announce that Christina Morris, JD has accepted the position of Prescription Drug Monitoring Program (PMP), Program Director. The Board unanimously approved Christina at their February 10, 2010 Board meeting.

Christina has been with the Board of Pharmacy since 2003. She accepted a part-time administrative assistant position while she was pursuing her undergraduate degree at Washburn University. She received a Bachelor of Business Administration Business Management degree in May of 2005 and graduated cum laude. She then received her Juris Doctor at Washburn University School of Law in May, 2008. Christina accepted the position of Assistant Director of the Board of Pharmacy upon graduation from law school. During this time she assisted the Executive Secretary as well as coordinated the PMP program

In 2008 the Legislature passed SB 491 charging the Board of Pharmacy with creating a prescription drug monitoring program. The legislation did not provide any funding for implementation of a program. During Christina's tenure with the Board of Pharmacy she has been instrumental in seeking funding for the PMP outside of the standard collection of licensure and registration fees. On February 15, 2010, the National Association of State Controlled Substance Authority (NASCA) announced that the Kansas Board of Pharmacy was the recipient of the 2010 PDMP Grant Program in the amount of \$20,072. NASCA grants are the result of support from Purdue Pharma LLP to NASCA for grants to assist states in providing enhancements and support for state PMP programs. This funding is in addition to a Harold Rogers grant from the federal Bureau of Justice

Assistance awarded to the Board of Pharmacy in the amount of \$400,000. The Board was also awarded the Substance Abuse and Mental Health Services Administration (SAMHSA) National All Schedules Prescription Electronic Reporting Act (NASPER) formula grant totaling \$66,407. These grants are essential to the Board in order to meet the legislative mandate without raising license or registration fees.

A PMP Advisory Committee of multidisciplinary stakeholders has been working with Christina the past year on drafting regulations. The regulations are important because they provide the specific guidelines and requirements of the PMP. The Advisory Committee also settled on three drugs to put into the initial regulations as drugs of concern. These drugs are (1) any combination product containing butalbital, acetaminophen, and caffeine; (2) carisoprodol; and (3) tramadol. Since the recommendation of the Committee, the DEA has published a proposed regulation scheduling carisoprodol as a controlled substance. The Regulations are scheduled for a public hearing on June 10, 2010 and then they will become final. The regulations can be reviewed on the Board website and we encourage you to comment on them prior to the public hearing if you have any concerns or comments.

The Advisory Committee has also developed a timeline and recently issued an RFP for a PMP vendor that closes in mid-April. Once a vendor(s) is selected, implementation will begin with oversight by the Board of Pharmacy. An education program will include information on the use of PMP as well as how to reduce the diversion of scheduled medications. The Advisory Committee would like to include some basic pain management assessment/treatment information as well as some addiction assessment/treatment information. The educational program will be developed in

conjunction with the health care community, through the respective professional associations. According to other states, the implementation period will vary and can last up to 12 months but the Board's target date is October of 2010. It is important to the Board of Pharmacy that there be communication with health care providers regarding the status of the program and required data submission.

The PMP program involves the exchange of health information. Pharmacies will be submitting prescription drug utilization data to the PMP. Prescribers and dispensing pharmacies will access this information for the care of their individual patients. Exchange of information through the PMP will be conducted intra-state, as well as inter-state.

The PMP Program Director will be responsible for designing print materials that will be sent to everyone in the health care community. The materials will provide a thorough review of the PMP Program and what part your pharmacy will play. The Director will also provide face to face education around the state prior to going live with the program.

There is an abundance of reasons why Kansas is one of the many states to enact a Prescription Monitoring Program. The emerging challenge of prescription drug abuse and misuse is a complex issue that requires a concerted effort by all Kansans. The Kansas PMP, along with treatment and prevention programs that include outreach and education, is a key part of responding to this issue. The resulting impact of reducing diversion of controlled substances will also assist law enforcement. In addition, the Kansas PMP will provide valuable and much needed data to health care providers and enhance their ability to manage chronic pain. In doing so, the benefits will be passed on to the residents of

Kansas who are the patients of these health care providers. It is a cycle that will continue to benefit Kansans for years to come.

The Board appreciates the Advisory Committee Members hard work the past year on this very important program. We would like to express our thanks in particular to the pharmacists on the Advisory Committee. They are Karen Braman, R.Ph.,M.S.; Max Heidrick, R.Ph.; Phil Schneider, R.Ph.; Lee Ann Bell, Pharm.D.; and Harold Godwin, R.Ph. We also would like to thank Christina Morris and congratulate her on her appointment as the PMP Program Director for the Kansas Board of Pharmacy.